

Note: This is a sample
template. it is not
an OMB approved
form.

Universal 911 Dialing- First Transition Report

Please read instructions before completing

Section 1

Carrier Identification Information

Parent Company Name

Nebraska Central Telephone Company

Service Provider Name

Nebraska Central Telephone Company

Company Address, City, State, Zip

PO Box 700

Gibbon, Nebraska 68840

Service Provider Type

☐ Wireless

☒ Wireline

Name(s) of Wireless License Holder(s)

Contact Name

Kevin McGregor

Contact Tel #

308-468-6341

Fax #

308-468-9929

E-mail Address

kmgregor@nctc.net

Section 2

Local Area 911 Implementation

List all individual local areas covered by this report (e.g., Lee County, Virginia):

Portion of Rock County, Nebraska served out of the North Burwell, Nebraska exchange (308-348). Fourteen subscribers.

Section 4

Certification - To be signed by an authorized representative of the reporting entity



I certify that I am an authorized representative of the above-named reporting entity, that I have examined the foregoing report and to the best of my knowledge, information and belief, all statements of fact contained in this form are true and accurate statements of the affairs of the above-named company.



I certify that I am an authorized representative of the above-named reporting entity, that I have examined the foregoing report and to the best of my knowledge, information and belief, all statements of fact contained in this form are true and that the reporting entity has completed the steps necessary to properly route 911 emergency calls in the localities covered by the report as of _____.

Signature

Kevin McGregor

Printed name of authorized representative Kevin McGregor

Title VP/Engineer

Date March 8, 2002

This filing is:

☒ original filing☐ revised filing

PERSONS MAKING WILLFULL FALSE STATEMENTS IN THIS DOCUMENT CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. §1001.